PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where n

appropriate. All further indicated unless correcte naintenance fee notifica	ed below or directed oth	ng the Patent, advance of the Patent, advance	rders and notification of ma) specifying a new corres	naintenance fees w pondence address;	vill be maile and/or (b)	ed to the current indicating a sepa	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND	Fee(Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must					
909 PILLSBURY V P.O. BOX 10500 MCLEAN, VA		PE	have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
		\ 3	<i>.§</i> / [(Depositor's name)
		(A)	TRADEMARK				(Signature)
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
09/555,236	05/25/2000		PEKKA PUHAKAINEN		270689		1456
	· · · · · · · · · · · · · · · · · · ·		YING A LOGICAL CHAN	NEL			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0		\$1400	10/10/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
HARPER, KEVIN C 2616			370-347000				
. Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The example of the example of the example of Correspondence Address form PTO/SB/122) attached. The example of			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or type	e)		·	
PLEASE NOTE: Unl	ess an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on the pa T a substitute for filing an a	tent. If an assigne	e is identifi	ied below, the do	ocument has been filed for
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STAME OF ASSIGNEE 0000079 033975 09555236							
Nokia Networks Oy			Espoo,	FINEAND 15	91 91	1400.00 DA 6.00 DA	
lease check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛱 Co	rporation or	other private gro	up entity Government
a. The following fee(s) are submitted: State State			 D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) □ A check is enclosed. □ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 62-3975 (enclose an extra copy of this form). 				
	tus (from status indicated	,	☐ b. Applicant is no long	er claiming SMAL	L ENTITY	status. See 37 CF	R 1.27(g)(2).
OTE: The Issue Fee and terest as shown by the r	d Publication Fee lifeque ecords of the Inited State	nired) will not be accepted	d from anyone other than the Office.				
Authorized Signature	JW//m					er 29, 20	
Typed or printed name Christine H. McCarthy				Registration No	o. <u>41</u>	844	
his collection of information application. Confident	ation is required by 37 C iality is governed by 35	FR 1.311. The informatio U.S.C. 122 and 37 CFR	on is required to obtain or re 1.14. This collection is esti	tain a benefit by the	e public wh	ich is to file (and implete, including	by the USPTO to process) gathering, preparing, and

Ŧ submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.